

RECEIVED USMS D/MT
APR 15 2025 AM10:32UNITED STATES DISTRICT COURT
for theDistrict of Montana CHAD STONE)
)
)
)
)
Plaintiff(s))
)
)
)
v.)
)
MIKE LINDER)
)
)
)
Defendant(s))
)

Civil Action No. CV-23-96-BLG-SPW-TJC

SUMMONS IN A CIVIL ACTION

To: (Defendant's name and address) MIKE LINDER
 YELLOWSTONE COUNTY SHERIFF
 2323 2ND AVE. N.
 BILLINGS, MT 59101

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are: CHAD STONE
 1106 W PARK SUITE 20-157
 LIVINGSTON, MT 59047

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

Date: 04/15/2025



TYLER P. GILMAN
 CLERK OF COURT

Signature of Clerk or Deputy Clerk

Civil Action No. CV-23-96-BLG-SPW-TJC

PROOF OF SERVICE*(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))*

This summons for *(name of individual and title, if any)* Mike Linder
was received by me on *(date)* 04-15-2025.

I personally served the summons on the individual at *(place)* 2323 Second Ave North
Billings, MT 59101 on *(date)* 04-21-2025; or

I left the summons at the individual's residence or usual place of abode with *(name)* _____
on *(date)* _____, a person of suitable age and discretion who resides there,
and mailed a copy to the individual's last known address; or

I served the summons on *(name of individual)* _____, who is
designated by law to accept service of process on behalf of *(name of organization)* _____
on *(date)* _____; or

I returned the summons unexecuted because _____; or

Other *(specify)*:

My fees are \$ 0.70 for travel and \$ 65.00 for services, for a total of \$ 65.70.

I declare under penalty of perjury that this information is true.

Date:

4/21/2025

Server's signatureP. Schally SDUSM

Printed name and title2601 Second Ave N. Billings, MT

Server's address

Additional information regarding attempted service, etc:

**U.S. Department of Justice
United States Marshals Service**

PROCESS RECEIPT AND RETURNSee "[Instructions for Service of Process by U.S. Marshal](#)"

PLAINTIFF CHAD STONE	COURT CASE NUMBER CV-23-96-BLG-SPW-TJC
DEFENDANT MIKE LINDER	TYPE OF PROCESS Service of Complaint & Summons

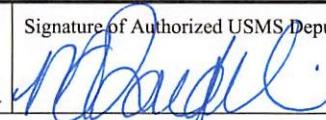
SERVE { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
MIKE LINDER
AT { ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
YELLOWSTONE COUNTY SHERIFF, 2323 2ND AVE. N., BILLINGS, MT 59101

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW U.S. DISTRICT COURT, CLERK'S OFFICE 2323 2ND AVE N., BILLINGS, MT 59101	Number of process to be served with this Form 285 1
	Number of parties to be served in this case 1
	Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (*Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service*):
SERVICE OF PROCESS DIRECTED BY ORDER OF THE COURT.

Signature of Attorney other Originator requesting service on behalf of: /S/ J. HARRIS, DEPUTY CLERK	<input checked="" type="checkbox"/> PLAINTIFF	TELEPHONE NUMBER 406-247-7001	DATE 4/15/2025
<input type="checkbox"/> DEFENDANT			

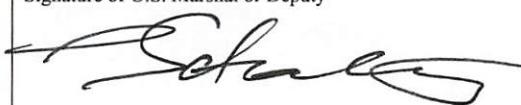
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. <i>(Sign only for USM 285 if more than one USM 285 is submitted)</i>	Total Process 1	District of Origin No. 4te	District to Serve No. 4te	Signature of Authorized USMS Deputy or Clerk 	Date 04-15-25
--	---------------------------	--------------------------------------	-------------------------------------	--	-------------------------

I hereby certify and return that I have personally served, have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the individual, company, corporation, etc. shown at the address inserted below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)	Date 4/21/25	Time 1330	<input type="checkbox"/> am
			<input type="checkbox"/> pm

Address (complete only different than shown above)	Signature of U.S. Marshal or Deputy 
--	--

Costs shown on [attached USMS Cost Sheet](#) >>

REMARKS


4-21-25